

03-25-02

GP #3722#

PTO/SB/05 (03-01)

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<b>Express Mail No.: EL474178545US</b>	<b>Attorney Docket No.</b>	38916/14140	<b>First Inventor:</b> Charles Casagrande
<b>AMENDMENT TRANSMITTAL LETTER</b>  <b>Title: FORM WITH INTEGRATED LABEL OR FOLD-OVER CARD INTERMEDIATE</b>		<b>Serial No.</b>	09/318,353
		<b>Filing Date</b>	March 25, 1999
		<b>Examiner</b>	M. Henderson
		<b>Group Art Unit</b>	3722

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.



Large Entity Status



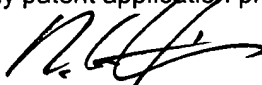
Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED - PART II						SMALL ENTITY		OTHER THAN SMALL ENTITY	
		(Column 1)		(Column 2)	(Column 3)				
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	26	Minus	24	= 2	x \$ 9.00 =	18.00	x \$ =	0.00
	Independent (37 CFR 1.16(b))	4	Minus	4	= 0	x \$ =	0.00	x \$ =	0.00
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x \$ =		+ \$ =	
						TOTAL ADDIT. FEE	18.00	TOTAL ADDIT. FEE	0.00

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
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 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

☒ Petition of Extension of Time.☐ No additional fee is required for amendment.☐ A check in the amount of the fee is enclosed.☒ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 20-0823.☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-0823.  
I have enclosed a duplicate copy of this sheet.☒ Any additional filing fees required under 37 C.F.R. 1.16.☐ Any patent application processing fees under 37 C.F.R. 1.17.

  
 Signature  
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KINDLY ACKNOWLEDGE RECEIPT BY DATE STAMPING AND RETURNING.

Applicant(s): Casagrande  
Title: Form with Interstitial Label  
or Fold-over Card Intermediate

- ☒ Transmittal Letter(s)  
☐ Specification: \_\_\_\_\_ Pages  
☐ Number of Claims: \_\_\_\_\_ Pages  
☐ Abstract: \_\_\_\_\_ Pages  
☐ Drawings: \_\_\_\_\_ Sheet(s) \_\_\_\_\_ Formal \_\_\_\_\_ Informal  
☐ Declaration/POA \_\_\_\_\_ signed \_\_\_\_\_ unsigned  
☐ Assignment  
☒ Amendment/Response  
☒ Petition under 37 CFR 1.136(a)  
☐ CPA Transmittal  
☐ Information Disclosure Statement w/Ref.  
☐ Issue Fee Payment  
☐ Request  
☐ Demand  
☐ Fee Calculation Sheet  
☐ Notice of Appeal ☐ Appeal Brief  
☐ Statement Under 3.73 (b)  
☐ Other

PCT/US #: 09/318,353  
 Filed: March 23, 1999  
 Att/Client/Matter No.:  
38916/14140  
☒ Small Entity Declaration  
☒ Fee of \$ 16 Paid by  
☒ Deposit Acct. No. 20-0823  
☐ Check No. \_\_\_\_\_

Date Mailed: 3-22-2002

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**EL474178545US**

Rev. 2/02

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